PTO/SB/17 (12-04v2)
Approved for use through 7/31/2006. OMB 0651-0032

Under the Paperwork Reduction Act of 1999, of person are reduired to					respond to a collection of information unless it displays a valid OMB control number.					
Effective on 12/08/2004.					Complete II Nilowii					
Fees pursuant to the Consolidated Appropriations Act, 2005 (H.R. 4818).					Application Number 0		09/833,649-Conf. #1743			
FEE TRANSMITTAL					*		April 13, 2001			
For FY 2005								atoshi OKAMOTO		
F01 F1 2003					Examiner Name Y.			. K. Aggarwal		
Applicant claims small entity status. See 37 CFR 1.27					Art Unit 26					
TOTAL AMOUNT OF PAYMENT (\$) 910.00					Attorney Docket No. 08					
METHOD OF PAYMENT (check all that apply)										
X Check Credit Card Money Order None Other (please identify):										
Deposit Account Deposit Account Number: 02-2448 Deposit Account Name: Birch, Stewart, Kolasch & Birch, LLP										
For the above-identified deposit account, the Director is hereby authorized to: (check all that apply)										
Charge fee(s) indicated below Charge fee(s) indicated below, except for the filing fee										
X Charge any additional fee(s) or underpayment of X Credit any overpayments										
fee(s) under 37 CFR 1.16 and 1.17										
FEE CALCULATION										
1. BASIC FILING, SEARCH, AND EXAMINATION FEES FILING FEES SEARCH FEES EXAMINATION FEES										
		FILI	NG FEES S Small Entity	EARCH FE Small		=XAMINA	Small Entity	i		
Application T	<u>ype</u> <u>l</u>	Fee (\$)	Fee (\$) Fee			Fee (\$)	Fee (\$)	<u>Fees Pa</u>	id (\$)	
Utility		300	150 50	0 25	0	200	100			
Design		200	100 10	0 5	0	130	65			
Plant		200	100 30	0 15	0	160	80			
Reissue		300	150 50	0 25	0	600	300			
Provisional		200	100	0	0	0	0			
2. EXCESS CLAIM FEES Small Entity										
Fee Description								<u>Fee (\$)</u>	Fee (\$)	
Each claim over 20 (including Reissues)								50	25	
Each independent claim over 3 (including Reissues)									100	
Multiple dependent claims								360	180	
Total Claims			Fee (\$) Fe	Fee Paid (\$) Mul			Itiple Dependent Claims			
	- 62 =	×	=		_	Fee	<u>(\$)</u>	Fee Paid (\$)		
-		_							-	
Indep. Claims	Extra Cla	ims x	Fee (\$) Fe	e Paid (\$)	_					
	-3=	 ^			_					
3. APPLICATION SIZE FEE If the specification and drawings exceed 100 sheets of paper (excluding electronically filed sequence or computer										
listings under 37 CFR 1.52(e)), the application size fee due is \$250 (\$125 for small entity) for each additional 50										
sheets or fraction thereof. See 35 U.S.C. 41(a)(1)(G) and 37 CFR 1.16(s).										
Total Sheets Extra Sheets Number of each additional 50 or fraction thereof Fee (\$)									Fee Paid (\$)	
- 100 = /50 (round up to a whole number) x								=		
4. OTHER FEE(S) Fees Paid (\$)										
Non-English Specification, \$130 fee (no small entity discount)										
Other (e.g., late filing surcharge): 1251 Extension for response within first month 1801 Request for continued examination (RCE) (see 37								120.00 790.00		
SUBMITTED BY										
Signature	10-11111				No.	39,491	Telephone	(703) 205	-8000	
Name (Print/Type)	Michael R. (Camma	rata		-		Date	August 15	2005	